

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	111
FORMALITY REVIEW	28	JC 873	12-13-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12-13-00
2	✓	✓	
3	✓	✓	A
4	✓	✓	A
5	✓	✓	A
6	✓	✓	D
7	✓	✓	A
8	✓	✓	A
9	✓	✓	A
10	✓	✓	A
11	✓	✓	A
12	✓	✓	A
13	✓	✓	A
14	✓	✓	A
15	✓	✓	A
16	✓	✓	A
17	✓	✓	A
18	✓	✓	A
19	✓	✓	A
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21	✓	✓	A
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25	✓	✓	A
26	✓	✓	
27	✓	✓	
28	✓	✓	A
29	✓	✓	A
30	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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